Additional Sampling Results Form

Air Monitoring Equipment Data

Manufacturer	Model # (Instrument Used)	Instrument #	Calibration Due Date	Field Cali Initials	bration By ID#	

Atmospheric Testing Data

Date	Time	Location of Reading	%Oxygen (19.5% To 23.5%)	%LEL (Below 10%)	Carbon Monoxide (Below 25 ppm)	Hydrogen Sulfide (Below 5 ppm)	Other Toxic (If Applies)	Notes (i.e. Pre-entry reading, During	Atmosphere Tested By Initials ID#	
				-	(= === FF===)	(Below 5 ppili)	(== - PP)	entry, etc.)		12"
									1	

NOTE: Testing results shall be recorded at a minimum of at least once per hour.

Attach this form to back of permit.